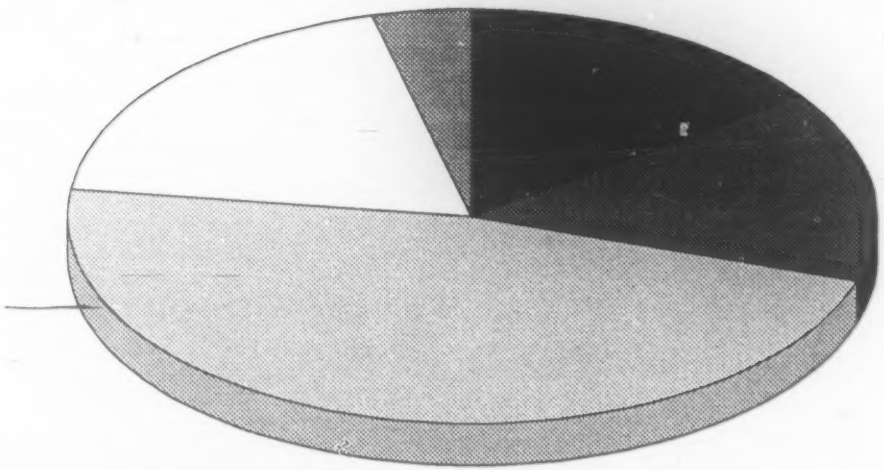
1988 PREVENTION BLOCK GRANT CHARTBOOK

March 1988



ASTHO Association of State and Territorial Health Officials

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FOREWORD

The *1988 Prevention Block Grant Chartbook* is a special publication depicting Preventive Health and Health Services (PHHS) Block Grant appropriation levels from 1982 to 1988 and state health agency and local health department uses and expenditures of fiscal year 1986 PHHS Block Grant funds. It is intended to show Congress the importance of the PHHS Block Grant to state and local health departments.

The PHHS Block Grant was created in 1981 to allow states maximum flexibility in allocating funds for their special preventive health needs. Despite being a very small federal funding source, the PHHS Block Grant has been a critical source of support for a number of important services. Its versatility has also enabled it to provide the majority of funding to some less visible services.

As inflation continues to diminish the spending power of PHHS Block Grant dollars, the need for increased funding has intensified. Inflation-adjusted PHHS Block Grant appropriation levels have been decreasing steadily since 1983.

I hope this chartbook proves a useful service to national and state policymakers. Narrative details of the various services provided by states through the PHHS Block Grant appear in the ASTHO publication, *1987 Report of State Activities*. *Prevention Notes*, a quarterly report on new and innovative preventive public health services, provides additional insight into state health agency activities. These reports are available upon request.

George K. Degnon
Executive Director
ASTHO

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Appendix

INTRODUCTION

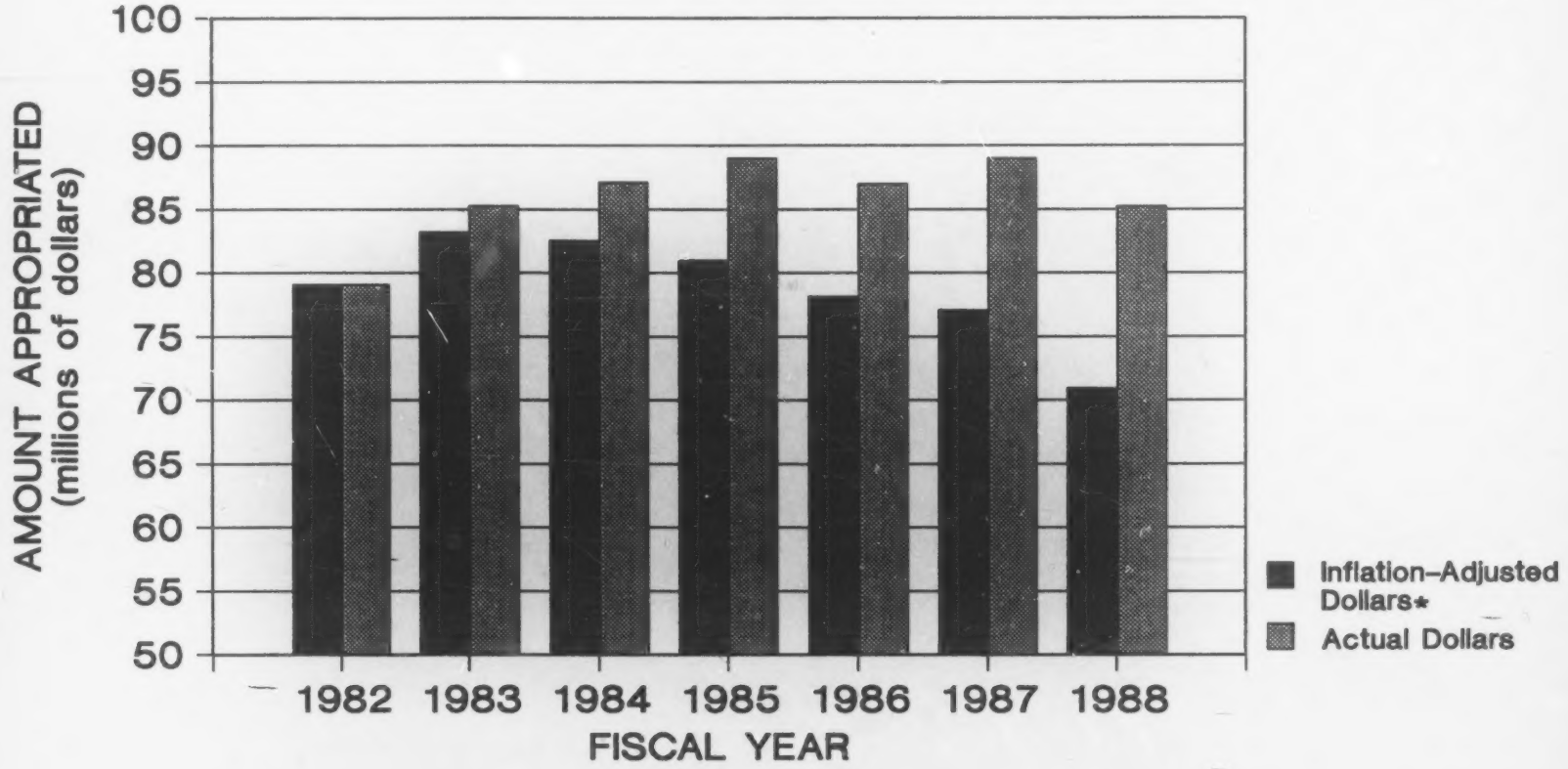
The Omnibus Budget Reconciliation Act of 1981 (PL 97-35) consolidated seven previously categorical grant programs into the Preventive Health and Health Services (PHHS) Block Grant. The PHHS Block Grant is a multi-purpose grant intended to give states greater discretion in allocating funds, thereby allowing them to focus on public health concerns most important in their states.

In fiscal year 1986, the most recent year for which data are available, the PHHS Block Grant, although representing only 1.2 percent of total state health agency expenditures, provided vital funding for some highly visible public health services. The four service areas most commonly funded by the PHHS Block Grant were hypertension control, sexual assault services, health education/risk reduction, and emergency medical services. The PHHS Block Grant provided one-third of the total funding for these four services combined.

The service area most dependent on PHHS Block Grant funds was hypertension control. Controlling high blood pressure through screening, diagnosis, and follow-up treatment has proven to be one of the most effective means available for reducing mortality in the adult population. More than 106,000 persons were newly diagnosed as hypertensive in fiscal year 1986 as a result of state and local health agency screening efforts as reported by 31 state health agencies. The Centers for Disease Control estimates that these screening and detection efforts may avert 10-15,000 adverse cardiovascular events over a five-year period, if the 106,000 newly-diagnosed individuals remain on treatment. The PHHS Block Grant provided 65 percent of the funding for hypertension services.

While the PHHS Block Grant was a critical funding source for a number of high visibility public health services, perhaps equally important was its versatility. Because the PHHS Block Grant can be used to meet state-determined priorities, it is unique in the sheer diversity of services it makes possible across the nation. For example, programs as diverse as Nebraska's State Health Laboratory, Virginia's Tumor Registry, and New York's Tuberculosis Control program relied on the PHHS Block Grant for over half their funding. Over three-quarters of the funding for New Jersey's Cardiovascular Disease and Diabetes program came from the PHHS Block Grant, while Massachusetts' Women's Health-Risk Reduction program was entirely funded by this relatively small, yet extremely important source of federal support. These programs, along with many others, relied on the PHHS Block Grant for funding that would otherwise not have been available.

FIGURE 1.
PREVENTION BLOCK GRANT APPROPRIATIONS, FISCAL YEARS 1982 – 1988



* These appropriations have been deflated to the equivalent of 1982 dollars. The rate of inflation is based on the "Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI–W)," March 1988.

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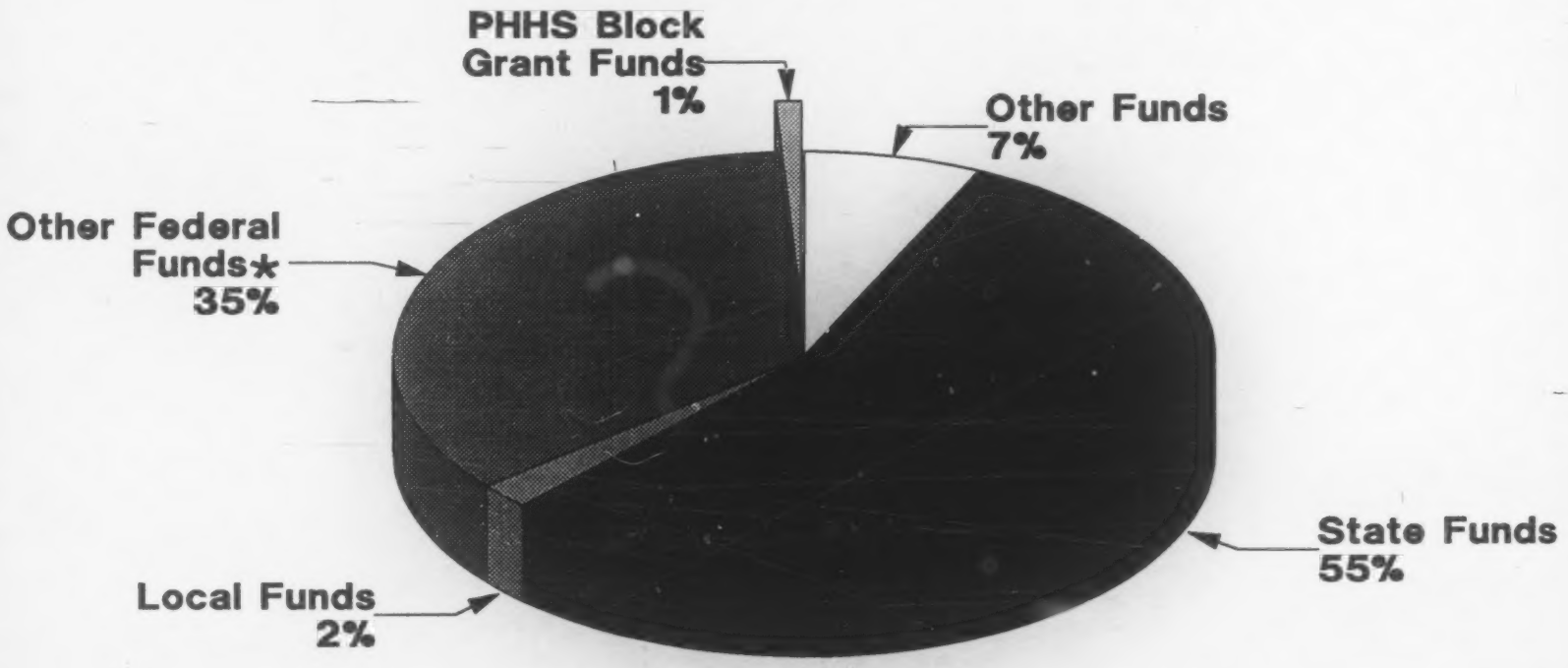
Figure 2.
STATE HEALTH AGENCY EXPENDITURES, BY SOURCE OF FUNDS, FY 1986

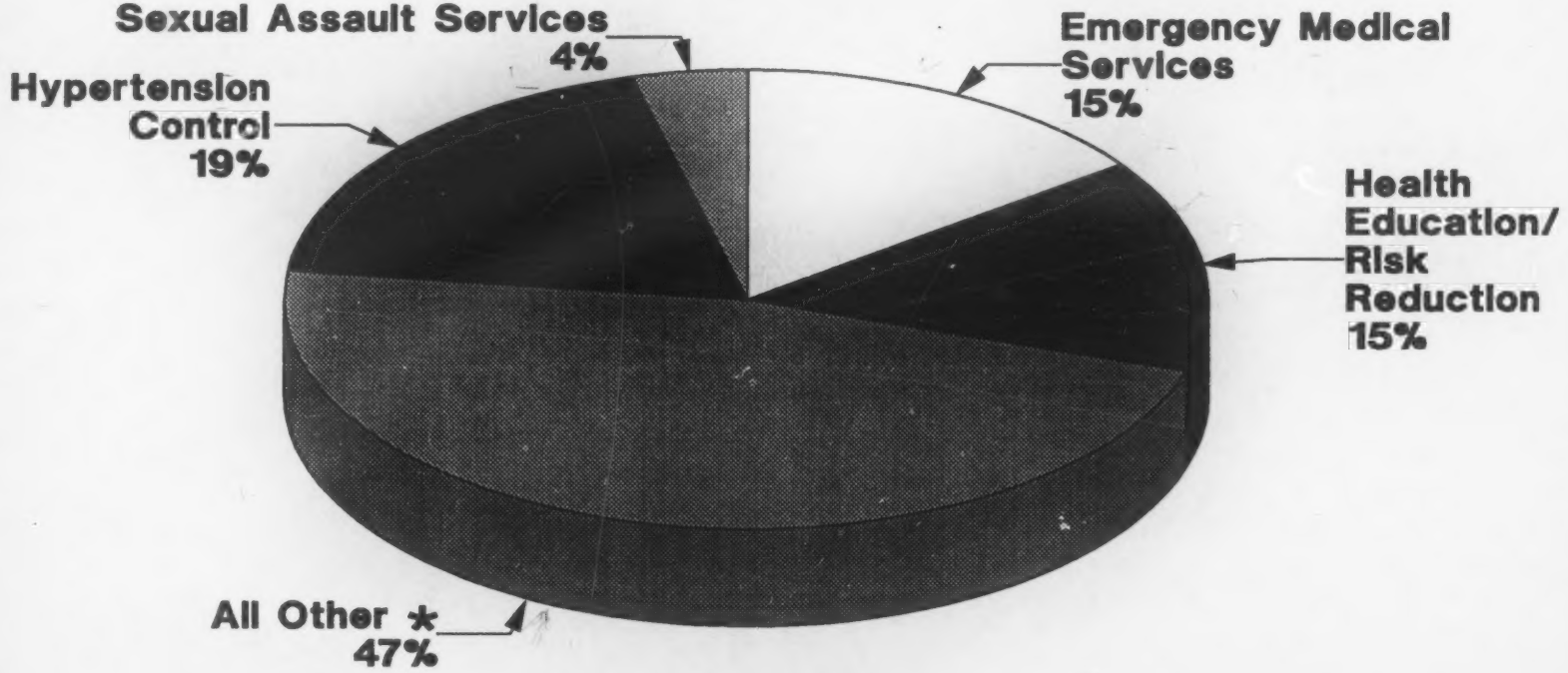


TOTAL: $7.5 Billion

* Includes all grant and contract funds from CDC, HRSA, HCFA, ADAMHA, USDA, and EPA. Does not include State Medicaid expenditures.

Source: PUBLIC HEALTH FOUNDATION *March 1988*

FIGURE 3.
STATE HEALTH AGENCY EXPENDITURES OF PREVENTION BLOCK GRANT FUNDS, BY TYPE OF SERVICE, FY 1986

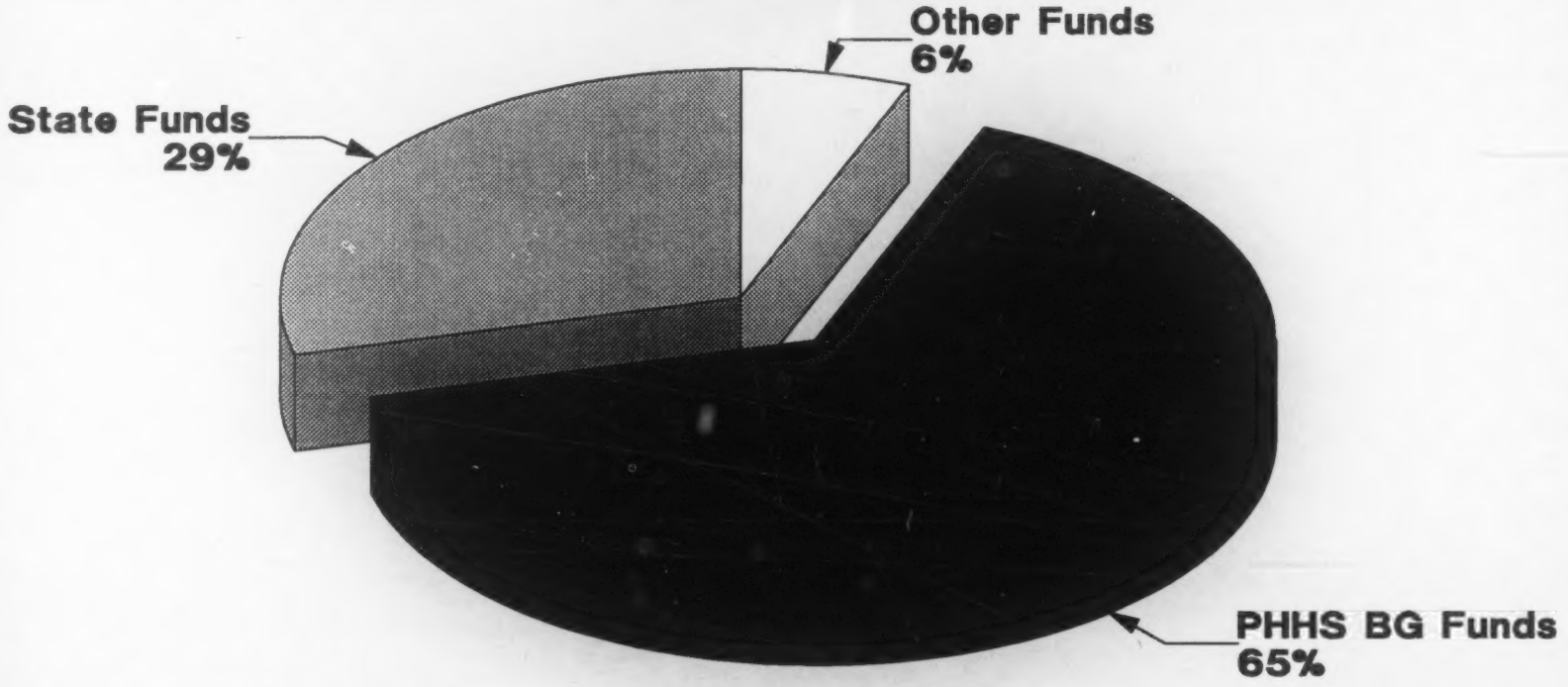


TOTAL: $87 Million

* Includes fluoridation services, rodent control, home health services and comprehensive public health services such as communicable disease control, AIDS services, chronic disease control, environmental health services, laboratory services, administration, and various local health services.

Source: PUBLIC HEALTH FOUNDATION *March 1988*

FIGURE 4.
EXPENDITURES FOR HYPERTENSION SERVICES, BY SOURCE OF FUNDS, 43 STATE HEALTH AGENCIES, FY 1986*



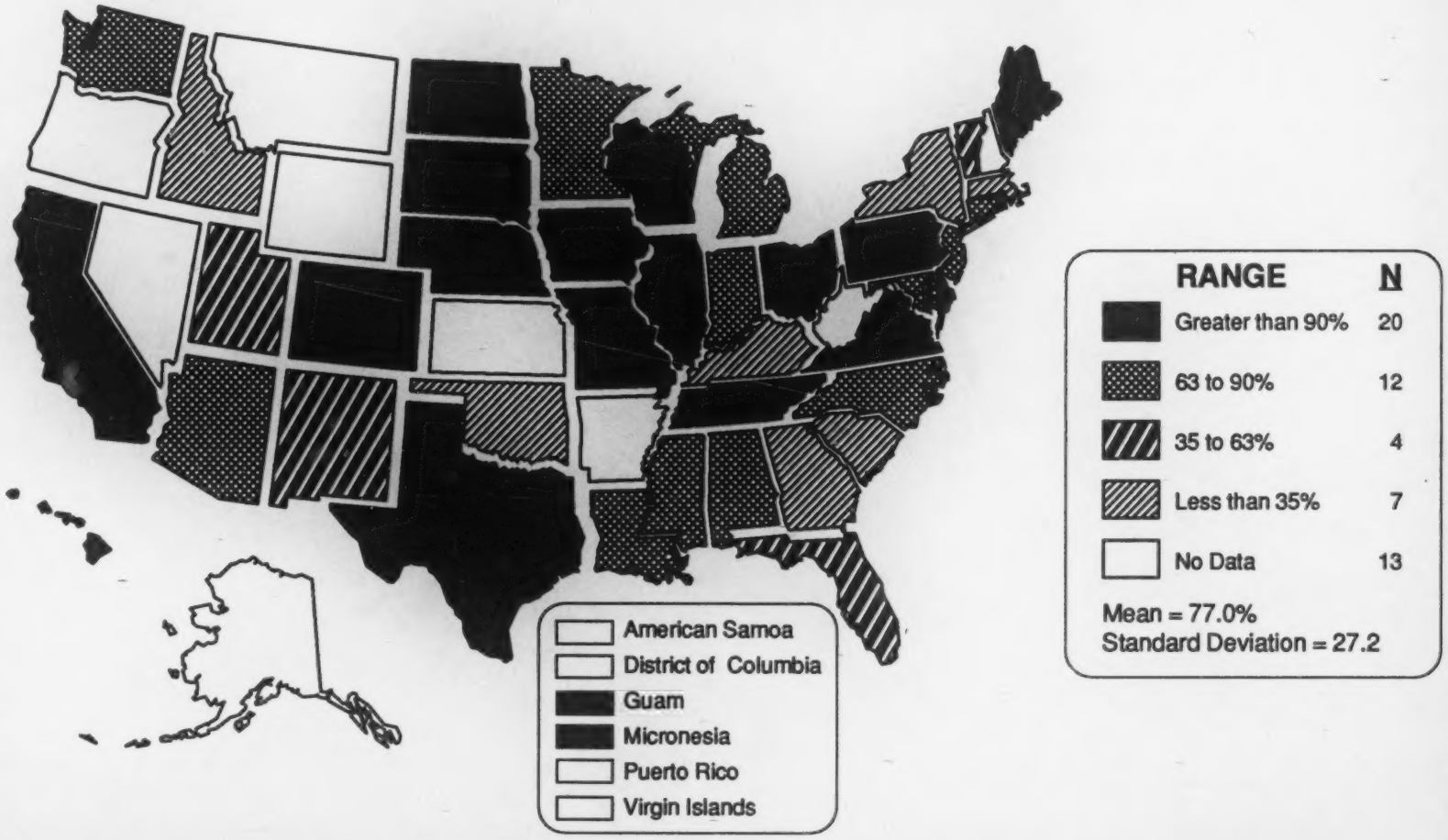
TOTAL: $25 Million

* Includes local health department expenditures.

Source: PUBLIC HEALTH FOUNDATION

March 1988

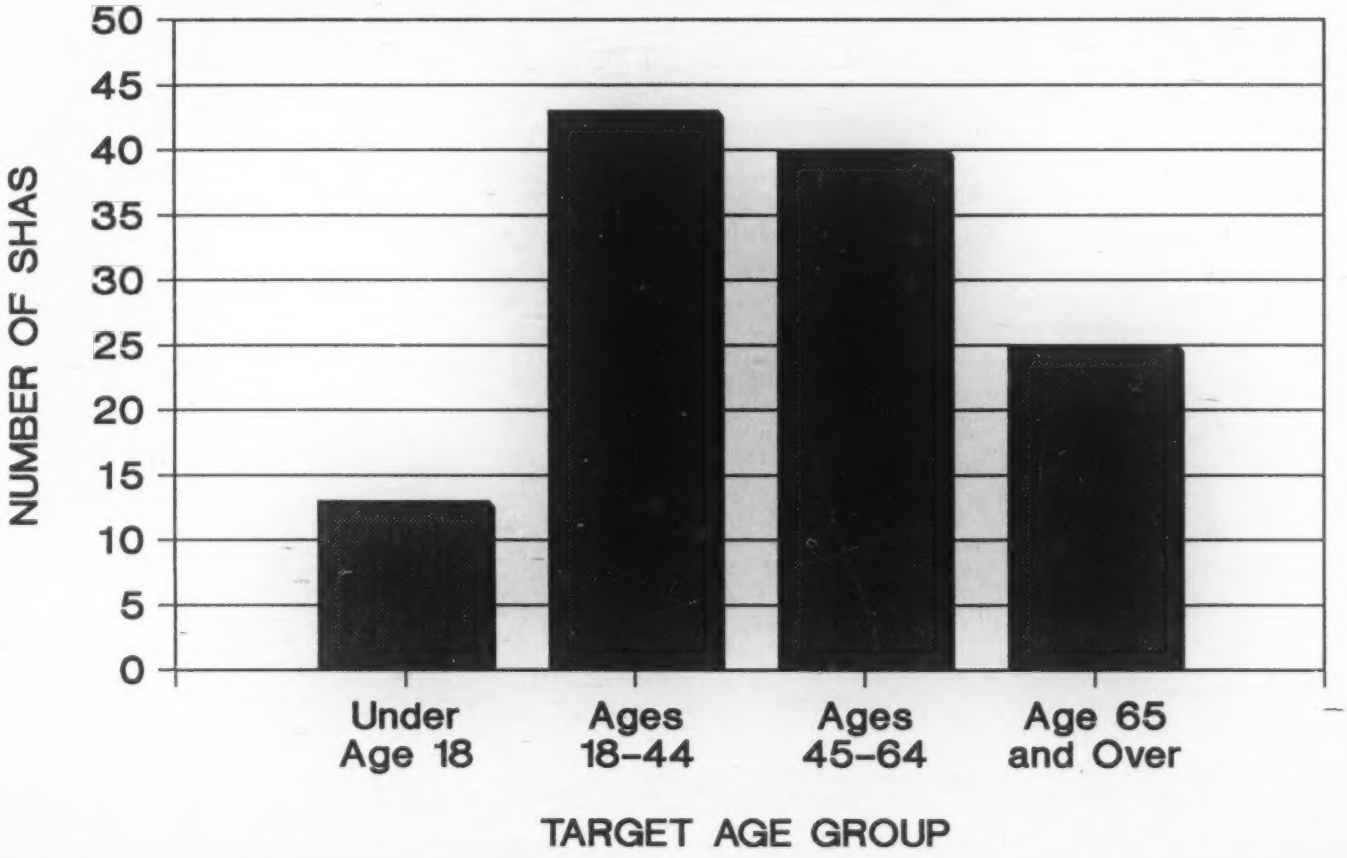
FIGURE 5.
PERCENTAGE OF STATE AND LOCAL HEALTH AGENCY EXPENDITURES FOR HYPERTENSION SERVICES FUNDED BY THE PREVENTION BLOCK GRANT, FY 1986



Source: PUBLIC HEALTH FOUNDATION

March 1988

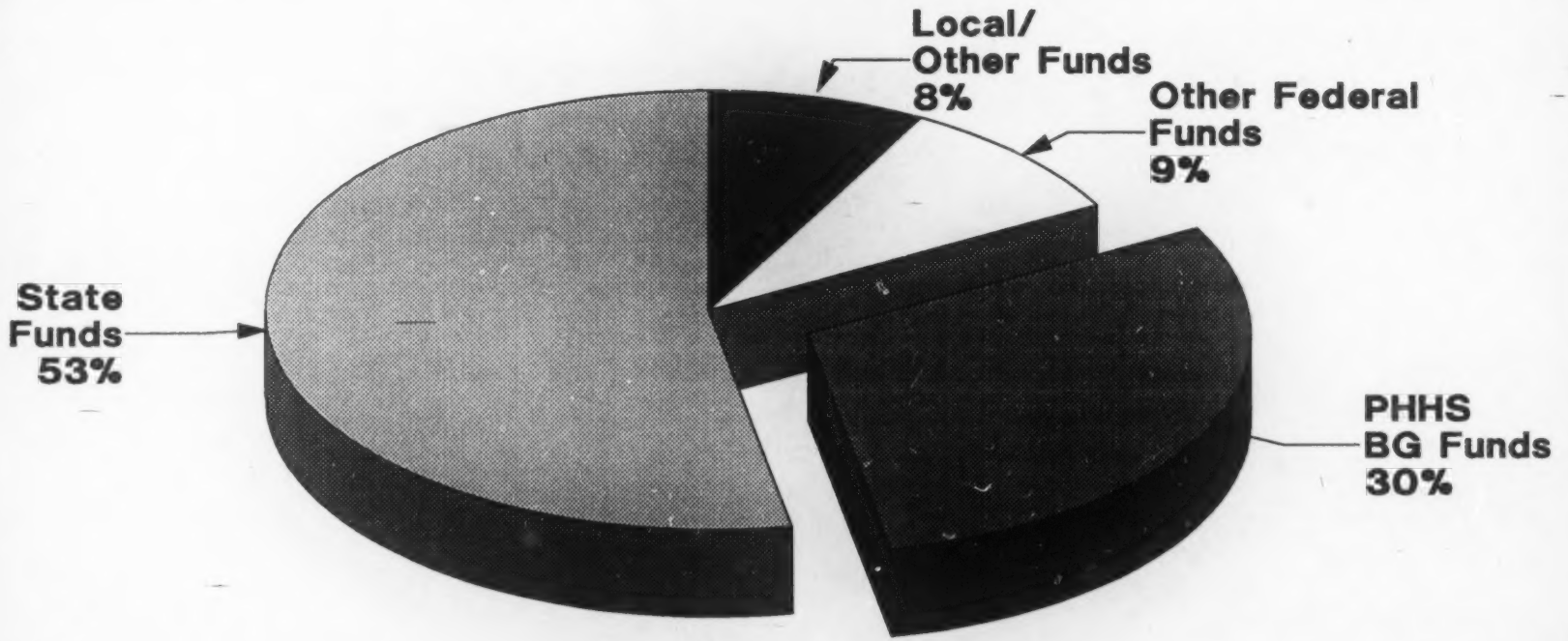
FIGURE 6.
TARGET AGE GROUPS FOR PREVENTION BLOCK GRANT–FUNDED HYPERTENSION SERVICES, 43 STATE HEALTH AGENCIES, FY 1986



Source: PUBLIC HEALTH FOUNDATION

March 1988

FIGURE 7.
EXPENDITURES FOR SEXUAL ASSAULT SERVICES, BY SOURCE OF FUNDS, 46 STATE HEALTH AGENCIES FY 1986*



TOTAL: $12 MILLION

* Includes local health department expenditures.

Source: PUBLIC HEALTH FOUNDATION

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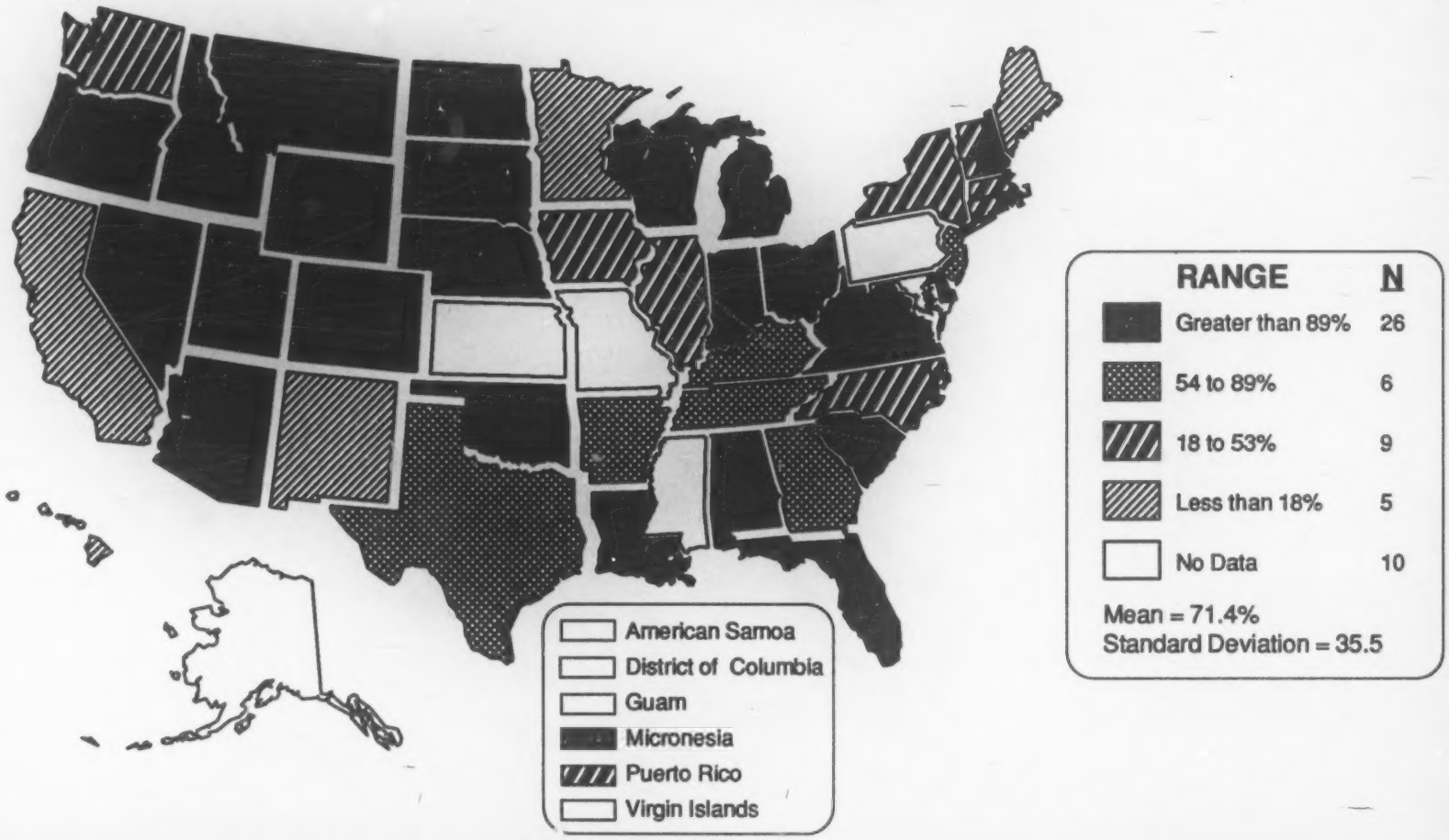
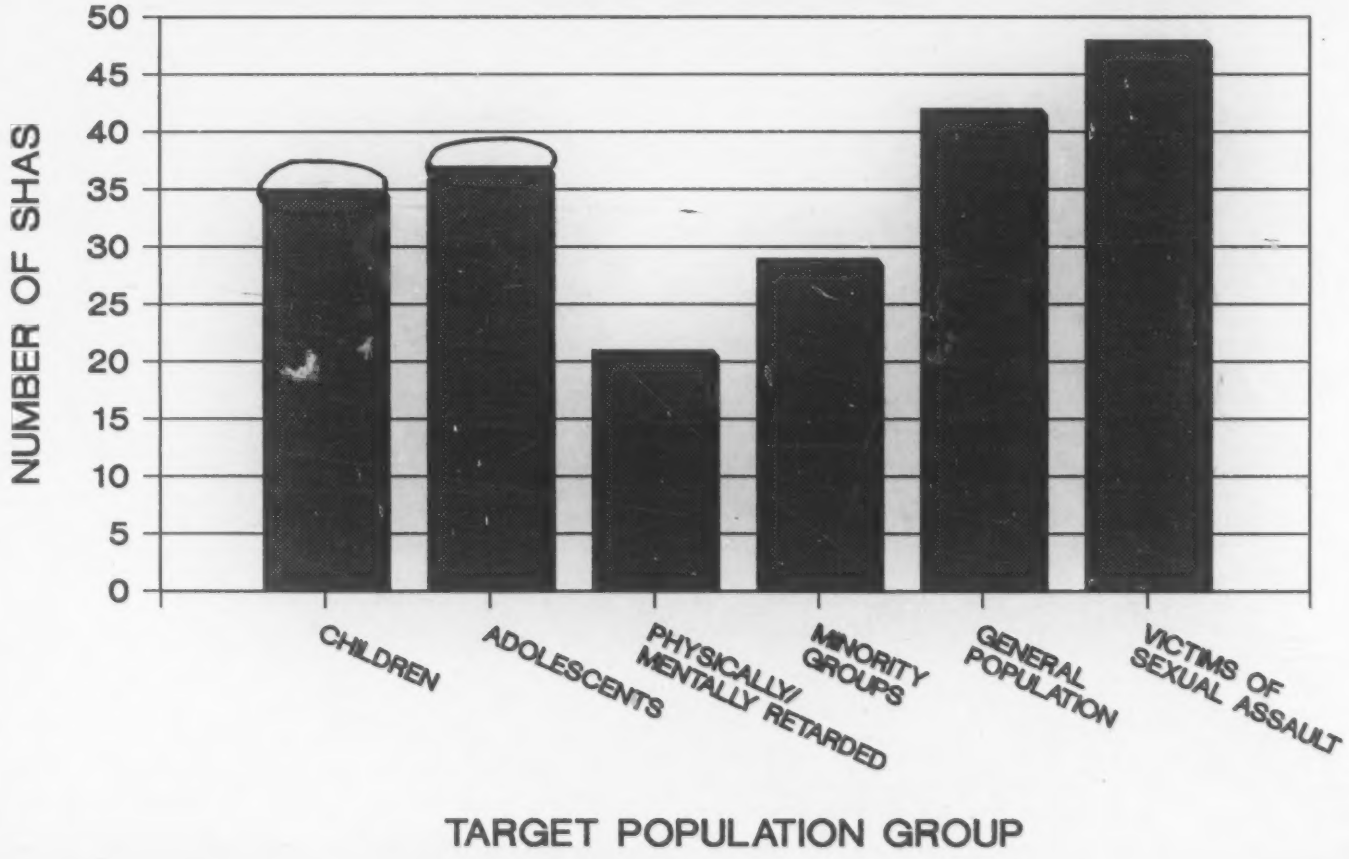
FIGURE 8.
PERCENTAGE OF STATE AND LOCAL HEALTH AGENCY EXPENDITURES FOR SEXUAL ASSAULT SERVICES FUNDED BY THE PREVENTION BLOCK GRANT, FY 1986



Source: PUBLIC HEALTH FOUNDATION

March 1988

FIGURE 9.
TARGET POPULATION GROUPS FOR PREVENTION BLOCK GRANT–FUNDED SEXUAL ASSAULT SERVICES, 49 STATE HEALTH AGENCIES, FY 1986



Source: PUBLIC HEALTH FOUNDATION

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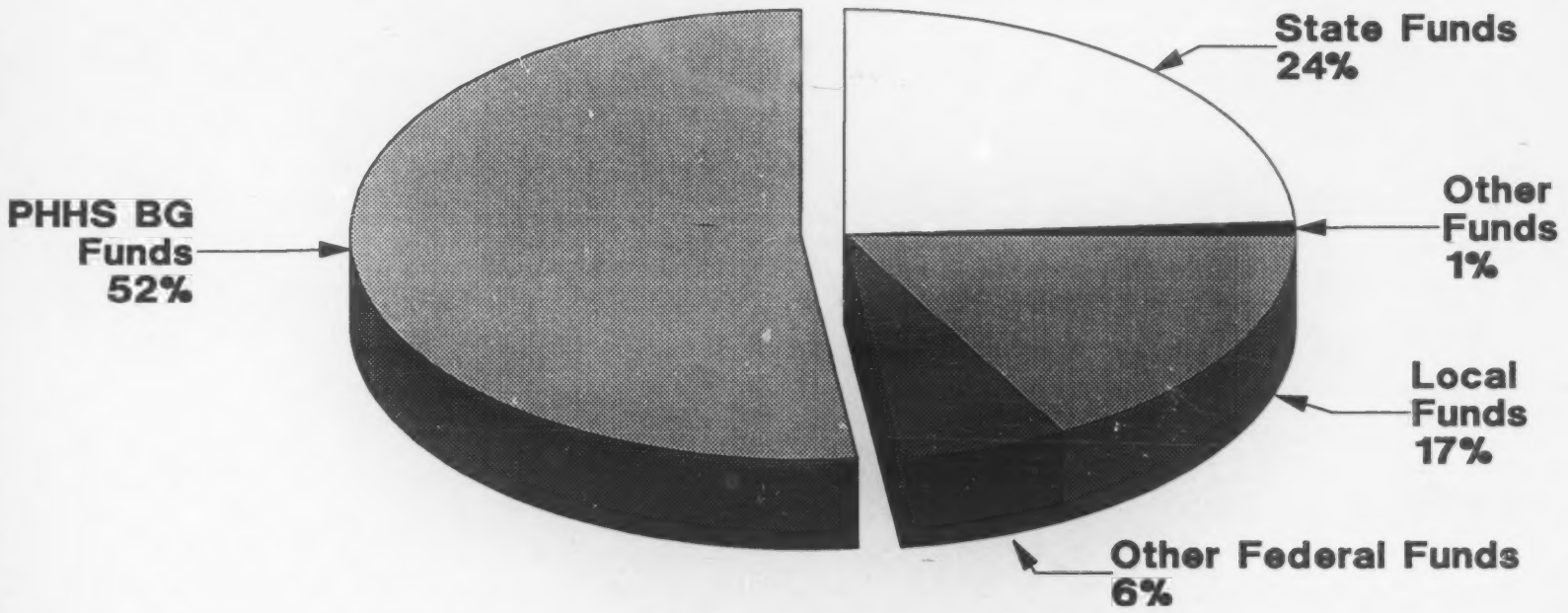
FIGURE 10.
EXPENDITURES FOR HEALTH EDUCATION/RISK REDUCTION SERVICES, BY SOURCE OF FUNDS, 38 STATE HEALTH AGENCIES, FY 1986*



TOTAL: $25 MILLION

* Includes local health department expenditures.

Source: PUBLIC HEALTH FOUNDATION

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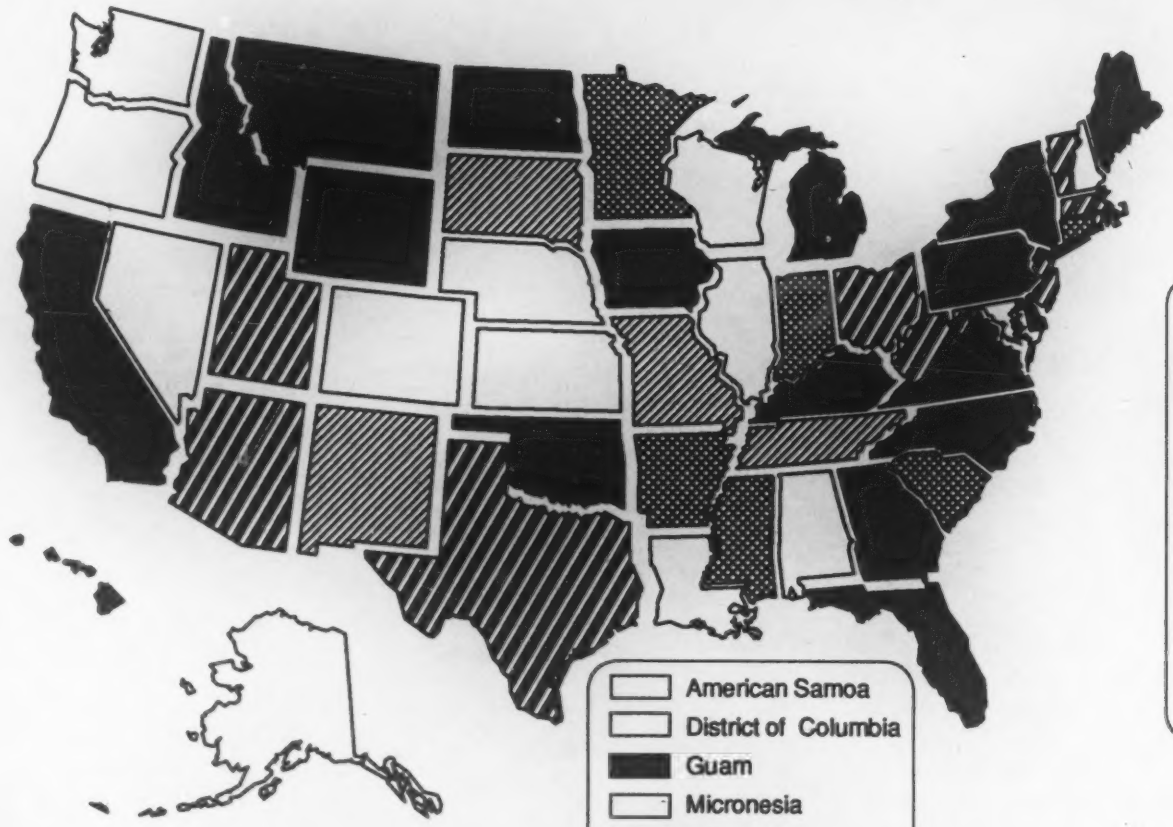
FIGURE 11.
PERCENTAGE OF STATE AND LOCAL HEALTH AGENCY EXPENDITURES FOR HEALTH EDUCATION/RISK REDUCTION SERVICES FUNDED BY THE PREVENTION BLOCK GRANT, FY 1986



RANGE	N
Greater than 89%	19
59 to 89%	6
29 to 58%	9
Less than 29%	4
No Data	18

Mean = 73.7%
Standard Deviation = 30.0

Source: PUBLIC HEALTH FOUNDATION

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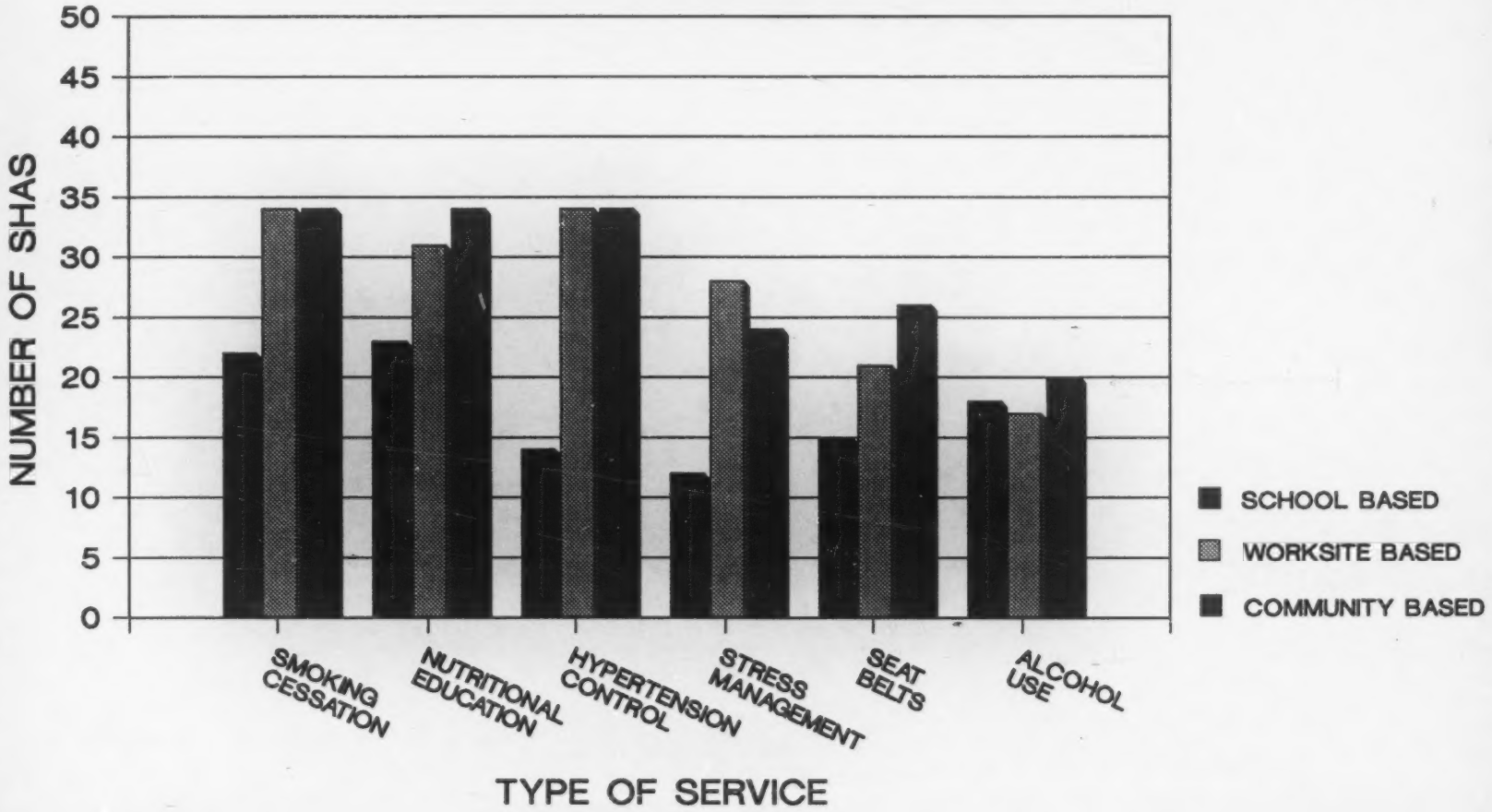
FIGURE 12.
PREVENTION BLOCK GRANT-FUNDED HEALTH EDUCATION/RISK REDUCTION SERVICES PROVIDED BY 38 STATE HEALTH AGENCIES, FY 1986



Source: PUBLIC HEALTH FOUNDATION

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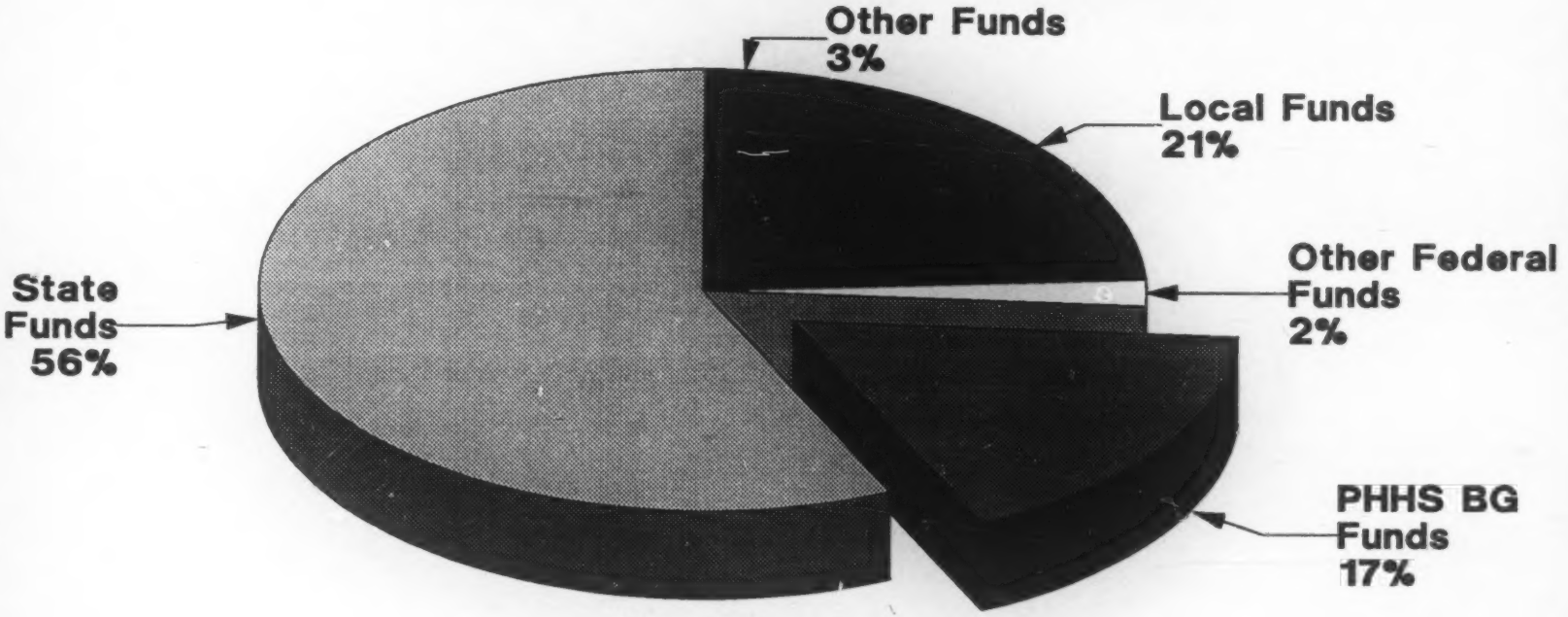
FIGURE 13.
EXPENDITURES FOR EMERGENCY MEDICAL SERVICES, BY SOURCE OF FUNDS, 34 STATE HEALTH AGENCIES, FY 1986*



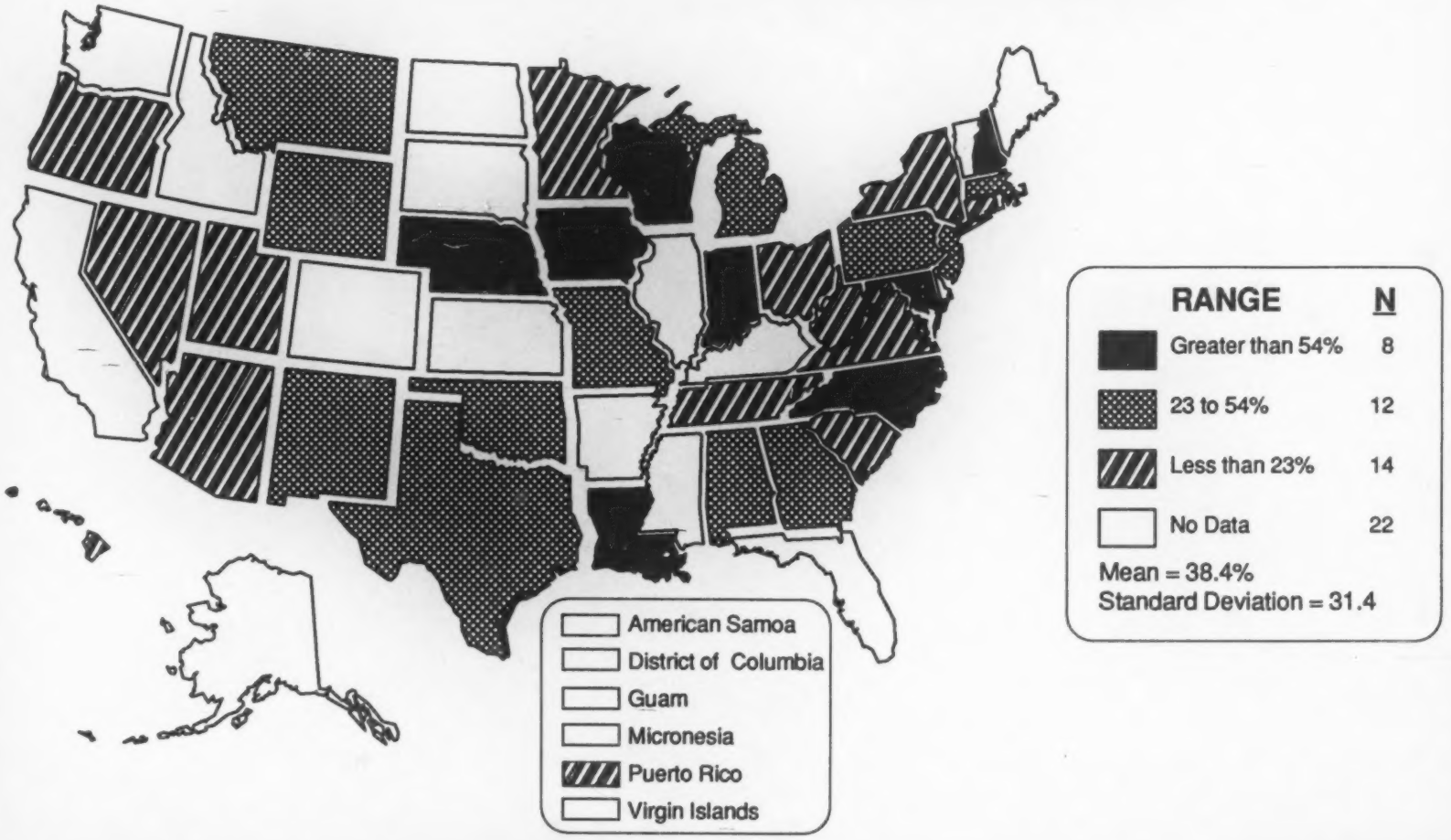
TOTAL: $77 MILLION

* Includes local health department expenditures.

Source: PUBLIC HEALTH FOUNDATION

March 1988

FIGURE 14.
PERCENTAGE OF STATE AND LOCAL HEALTH AGENCY EXPENDITURES FOR EMERGENCY MEDICAL SERVICES FUNDED BY THE PREVENTION BLOCK GRANT, FY 1986



Source: PUBLIC HEALTH FOUNDATION

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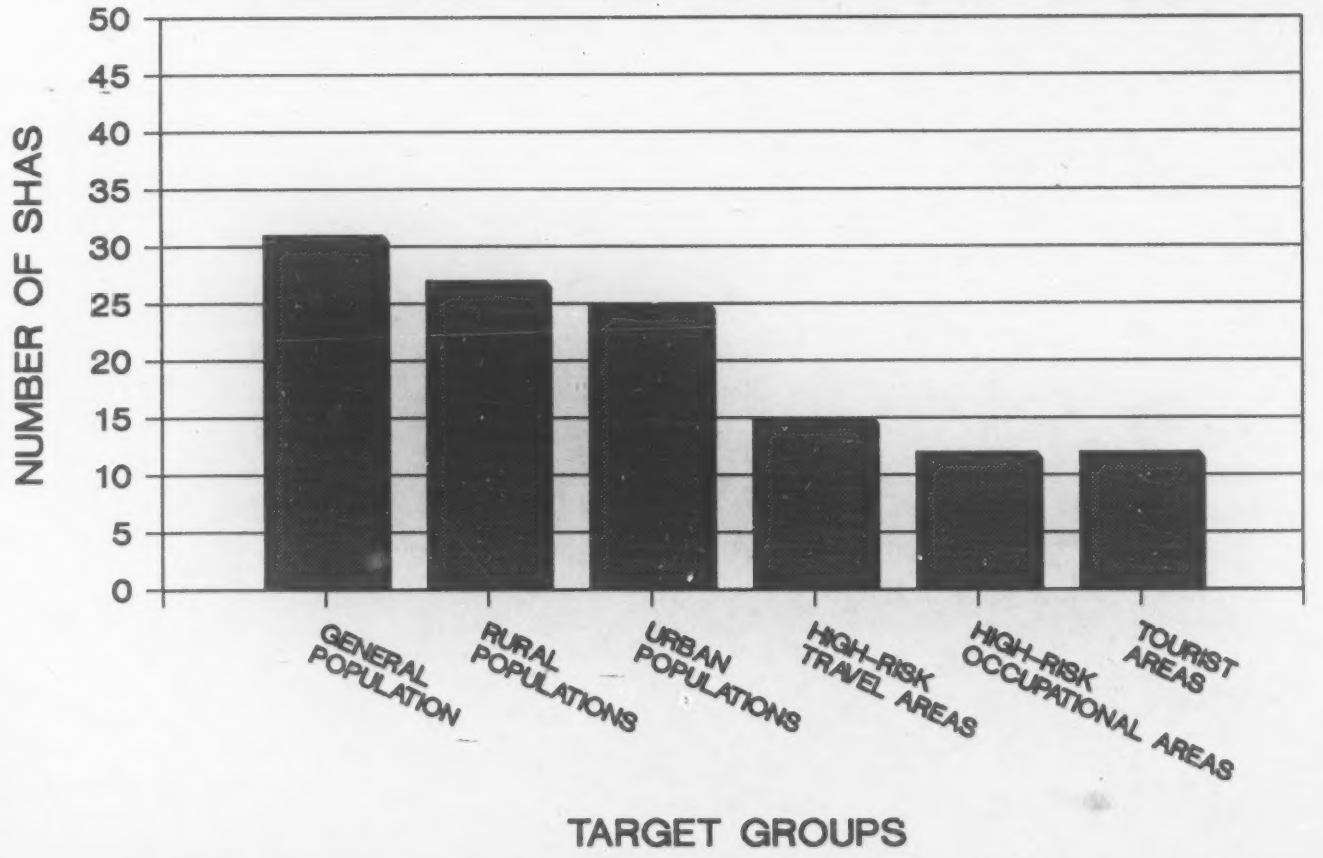
FIGURE 15.
TARGET GROUPS FOR PREVENTION BLOCK GRANT-FUNDED EMERGENCY MEDICAL SERVICES, 35 STATE HEALTH AGENCIES, FY 1986



Source: PUBLIC HEALTH FOUNDATION

March 1988

APPENDIX

Data Collection Methodology and Reporting Universe

The Public Health Foundation's ASTHO Reporting System was established by the Association of State and Territorial Health Officials (ASTHO) in 1970 to document the services, programs, and expenditures of the nation's state health agencies (SHAs). The information collected by the Foundation is intended primarily to aid planning, evaluation, budgetary, and legislative activities at the national level. Users of the data and Foundation reports at the national level include the Congress, the Department of Health and Human Services, other federal agencies, and ASTHO on behalf of the states and territories. Use of the data by state governments and other interested parties is an important secondary objective.

The Public Health Foundation has annually monitored SHA spending of PHHS Block Grant funds and funds from its predecessor categorical grants. In March 1987, the Foundation initially surveyed the SHAs to determine which services were most commonly supported by PHHS Block Grant funds. A survey instrument was then designed around the four services reported to be most frequently funded by the PHHS Block Grant: hypertension control, health education/risk reduction services, sexual assault services, and emergency medical services.

This chartbook contains graphics displaying results from this survey for fiscal year 1986. Fifty-two SHAs responded to the survey although not all reporting SHAs provided all the requested information. The four nonreporting SHAs are in Alaska, American Samoa, the District of Columbia, and the Virgin Islands.